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Bib Data Sheet

CONFIRMATION NO. 8356

<b>SERIAL NUMBER</b> 09/875,989	<b>FILING DATE</b> 06/08/2001 <b>RULE</b>	<b>CLASS</b> 358	<b>GROUP ART UNIT</b> 2622	<b>ATTORNEY DOCKET NO.</b> 35.G2833
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**\*\* CONTINUING DATA \*\*** ..... NAME SKS  
 YES SKS

**\*\* FOREIGN APPLICATIONS \*\*** .....  
 JAPAN 2000-186144 06/21/2000  
 JAPAN 2001-103685 04/02/2001

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 08/14/2001**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 41	TOTAL CLAIMS 73	INDEPENDENT CLAIMS 12
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>S. S. SKS</i> Initials: SKS				

**ADDRESS**  
05514

**TITLE**  
Printing control device and printing control method, printing control system, and recording medium

<b>FILING FEE RECEIVED</b> 2888	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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